

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sup-8

Himat, Inc.
 John A. Christy, Esq., registered agent
 1600 Candler Building
 Atlanta, Georgia 30303

alias sam i card

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

J. WALKER

B. Date of Delivery

4-10-06

C. Signature

X [Signature]

☐ Agent

☐ Addressee

D. Is delivery address different from item 1?
 If YES, enter delivery address below

☐ Yes

☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☒ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

7003 0500 0000 1375 2140

PS Form 3811, July 1999

Domestic Return Receipt

06-206

102595-00-M-0952